

EDITORIALS

A BICENTENNIAL EDITORIAL

Another "War" for Independence?

THE FOUNDING FATHERS of this nation were concerned with independence and with establishing a government that would serve the people and rid them of tyranny. They could not foresee the extent of the technological, social, economic and political interdependence that was to become a reality by the time of this bicentennial year. Nor did they foresee the huge and unwieldy bureaucracy that would come into being in the effort to deal with it. The full extent and meaning of the interdependence is yet to be fully comprehended in not only its national but its worldwide ramifications. But it is becoming clear that a major problem for America in its third century will be how to maintain some degree of freedom and independence within a framework of increasing interdependence. Boiled down, the issue is whether the people of this nation can any longer govern themselves or must they be governed and told what they may and may not do by an often impersonal and remote government, much as was the case in 1776.

This issue and its attendant problems are certain to plague third century America. They are already coming into focus in the field of health, where the question of governance for the health care enterprise in this nation has become a critical one. The health industry, one of the largest in the nation, is the first such that the federal government is trying to regulate and control in its entirety, and this is because the ramifications of the growing interdependence first became acute in this field. It all stems from technologic success. The quality of American medicine is the highest in the world. The fact is that American medicine can now do more for more people than we are willing to pay for. And besides being a scientific

and technologic enterprise, medicine and health is a deeply human affair which is especially important when health is not there or is lost. It is very clear that America now wants more health, more health care, more well-being and more quality of life—and wants more of it per dollar. So, it is in medicine and health care that the realities of technologic achievement, rising aspirations, expectations and costs; and growing social, economic and political interdependence have now reached critical proportions. And it is in medicine and health care that the precedents for solving these emerging problems of American and eventually of world society may be set.

Governments are formed for the purpose of governing and our American government is no exception. Particularly, and uniquely for the times, it was formed to serve rather than to rule the people, and to govern with the consent of the governed. But over the years a governmental giant came into being—a giant which has become so large and powerful that it is sluggish in motion, inefficient in performance and unbelievably costly to feed and maintain. It is this giant to whom the responsibility has fallen to try to regulate and control the health enterprise of this nation. It so happens that the giant knows only one way to do things. This is to pass laws, make regulations which have the force of law, extract dollars from taxpayers, and allocate or withhold dollars as suits its purpose. It is these powers that made the giant a giant and since it knows no other way, it may be expected to resist any effort to forestall, change or reduce its powers. Knowing no other way, it is now using these familiar tools to regulate every aspect of the health care industry—manpower education and training, research, services to people and even drugs, equipment and supplies. The result is that the government giant is beginning really to control and rule the lives of people, or at least a segment of the people—those who are the providers and recipients of health care services—while of course at the same time observing the conventional rhetoric, which holds that government has the duty to impose whatever rules, regulations, incentives and deterrents it deems necessary in the service of the taxpayers and the public. The possibility of tyranny is clearly present if this approach suc-

ceeds in health and is extended to other fields, and the future of independence within what must from here on be a framework of increasing interdependence is uncertain at best.

It is the reality of technological, social, economic and political interdependence—with all its implications—that must be faced. This will not go away, nor can it safely be ignored. Rather it will bring greater problems, and new techniques for governance will be needed to solve them. If the trend to rule by government bureaucrats is to be reversed, some means of returning at least some of the decision making to the people who are involved must be found. The health enterprise is now at the interface where this may or may not be done depending upon what ingenuity and leadership is shown. What is done or not done is likely to set the precedents for what happens in other fields and indeed for the next century of America. It is therefore a serious matter.

At first sight it might seem that the government giant has the overwhelming advantage with its accepted and deeply entrenched powers, and because it has assumed the battle initiative by invading the field of health care on a very broad front. But it is suggested that this advantage may not necessarily be as real as it seems. For one thing the government giant is weak in spite of its great size. The fact is that it is not doing a good job and probably it cannot. Perhaps its greatest strength may even be its greatest weakness. It may be that simply passing more laws, making more regulations, creating more agencies and allocating or withholding more dollars only compounds the problems and are actually counterproductive. It already seems so. But this is the only approach the giant knows and although it is ill suited to solving the problems of the health enterprise it will be continued. Sooner or later the public will become disenchanted, fed up with rising costs, increasing government restrictions and poor results. The first question, important as it is, "Who will get the blame?" is not as important as the second question, "Will there be an alternative method available for the governance of health care when the time comes?"

The issue really gets down to whether government is to be master or servant of the people in their day-to-day lives, and to what extent can the people be involved in the decision making which affects them and what they do, and to what extent can they have the power of consent. In short, how can the people exercise some personal and pro-

fessional independence within the now inescapable framework of national and even worldwide interdependence.

What may be needed is for another "war" for independence to be waged at this time by America's health enterprise. It should be led and coordinated by medicine. It should be a preventative war in behalf of the public against impending tyranny by government. Its stated purposes should be acceptable to all segments of the health enterprise and to the public. The strategy should be at least three pronged: (1) expose and exploit the weaknesses and mistakes of the federal bureaucracy whether in the administrative or legislative branches of government, (2) identify and define the needs and concerns of the public and groups within the public and become their advocate and (3) perhaps most important, develop an alternative to federal rule of the health enterprise which will allow for some internal governance (with some independence and provision of some consent of the governed) within the framework of technological, social, economic and political interdependence that now exists and will continue henceforth.

The Goliath of government may not be all that invincible, particularly if David takes good and careful aim with his slingshot.

—MSMW

The Biological Substrates of Mental Illness

IT IS AN INTERESTING PARADOX that the antipsychiatry movement and its opposition to the medical model of mental illness has achieved prominence and some influence at a time when that model and the sciences on which it depends have made gratifying progress in the treatment of the major mental illnesses and have elucidated some of the neurobiological processes on which an understanding of their causes and pathogenesis may well depend. In the past 25 years new drugs have become available and widely applied with salutary specificity against the cardinal, incapacitating symptoms of mental disorder¹ and fundamental knowledge in the rapidly growing neurosciences has supplied the basis for explaining their mechanisms of action.

The first of the phenothiazines was introduced